

AIM Awards Level 4 Diploma in Counselling Skills and Theory June 2017 Series

Introduction

131 scripts were received from 14 Centres. The question paper was designed to test candidates' knowledge and understanding of ONE of the three main approaches to counselling and how this theoretical understanding will influence their counselling practice.

The relevant learning outcomes and assessment criteria are shown below

| LEARNING OUTCOMES | ASSESSMENT CRITERIA |
|---|---|
| The learner will: | The learner can: |
| 1. Understand key concepts of the chosen core theoretical model | 1.1 Summarise the key concepts of the core theoretical model 1.2 Evaluate the key interventions of the core theoretical model 1.3 Develop self-awareness in relation to the core theoretical model |
| 2. Understand the strengths and limitations of the chosen core theoretical model | 2.1 Summarise the key strengths of the core theoretical model 2.2 Summarise the key limitations of the core theoretical model |
| 3. Understand the process and practice of counselling within the core theoretical model | 3.1 Evaluate the skills required to establish the counselling relationship within the core theoretical model 3.2 Evaluate the skills required for developing and sustaining the counselling relationship within the core theoretical model 3.3 Evaluate the skills required for reviewing and concluding the counselling relationship within the core theoretical model |
| 4. Understand the importance of supervision in counselling practice | 4.1 Analyse how supervision helps to monitor, support and challenge ethical practice 4.2 Explain the key benefits of the supervisor-supervisee relationship 4.3 Evaluate the contribution of supervision to the client-counsellor relationship |

The style of the paper was the same as in previous series – client scenario followed by questions. Questions were focussed on, though not entirely limited to, the Indicative Content to be found in the Qualification Specification.

The paper contained a total of 4 questions and the mark distribution against the assessment criteria is shown below.

Distribution of marks against questions

| Question | Number of marks | Criteria Covered |
|--------------|-----------------|--------------------|
| 1 | 3 | 4.1, 4.2 |
| 2 | 9 | 1.1, 1.2, 2.1, 2.2 |
| 3a | 9 | 3.1 |
| 3b | 9 | 1.3 |
| 3c | 3 | 1.3 |
| 4a | 9 | 3.2 |
| 4b | 9 | 3.3 |
| Total | 51 | |

Comments

Overall, the standards achieved by candidates in this examination were considered by the examiners to be relatively high compared to previous series and to comparable tests held elsewhere.

The majority of candidates succeeded in attempting all the questions in the time available.

Question 1

Candidates who scored highly in this question set about choosing concrete issues gleaned from the scenario and explaining why these issues would be taken to supervision. Poor answers were characterised by irrelevant explanations of theoretical approaches to supervision – mostly Proctor's three stages. Most of these answers were rather general and not related to the scenario. Some were so general they could be applied to any scenario. It is important that candidates understand that in this examination the answers must contain detailed reference to the scenario. They must attempt to put themselves in the shoes of the counsellor.

Question 2

Candidates who scored highly in this question set about choosing three key concepts from their core theoretical model, naming them and then carefully explaining how they would help (or not) with the situation that Alex found himself in. Where candidates did not score well this was mainly due to a misunderstanding about the meaning of key concepts of a core theoretical model. These candidates chose to write about generic counselling skills such as paraphrasing, summarising, challenging etc. In person centred answers some candidates set themselves a very difficult task by choosing largely meta-theoretical constructs that were then difficult to explain in terms of strengths and limitations in the work with Alex. Common examples of these meta-theoretical constructs would be self-concept or hierarchy of needs. It is worth repeating that candidates who approach this examination with a view to writing as the counsellor of the person in the scenario are likely to succeed. Those who attempt the examination from a theoretical or hypothetical stance are unlikely to score highly.

Question 3

3 (a) This question was answered very well overall. It seemed that candidates had taken the advice to try and put themselves in the shoes of the counsellor as indicated by the rubric. Many scored the full nine marks by identifying the issues from the scenario such as the suicide risk and the means (prescribed medication), motive (likelihood of his children being taken away) and opportunity (his isolated living conditions). This together with the curiosities about access to both sets of twin and potential legal and medical considerations were easily identified. Unfortunately, a considerable minority were distracted by erroneous thoughts about the shared bathroom facilities being a safeguarding risk to the twin boys. Forgetting perhaps that shared bathroom facilities are the norm in family homes and when children go to school, sports clubs, swimming pools etc. The examiners were concerned by this extemporising beyond the scenario, if candidates truly believed this to be a situation in which they would breach the client's confidentiality; a professional conduct complaint would likely follow. It was also extremely worrying to note that these same candidates, who are about to embark on practice independent of a placement, apparently understand so little about the role of the counsellor – some went as far as obtaining legal advice for Alex; suggesting that his GP had misdiagnosed him and that he didn't need his medication. These candidates strayed into roles they weren't qualified for, gave advice and focussed on fixing all the problems rather than offering Alex counselling.

3 (b) Unfortunately this part of the question was not generally answered well. A few candidates could link their thinking in (a) to problems in establishing a therapeutic alliance and giving specific examples such as countertransference, inability to empathise or lack of UPR. Most were characterised by vague description or continuing the problem-solving approach outlined in part (a) which although the word autonomy often appeared in answers took little real account of what Alex might want or need.

3 (c) This question elicited some surprisingly poor answers and if these were an accurate description of how candidates might describe their practice as a counsellor in a first session would be highly unlikely to lead to a second. Here candidates were asked to state in simple terms how they might answer the basic question: what is counselling to a new client. The examiners anticipated that candidates would be well prepared to explain counselling in language that a client might understand but were disappointed.

Question 4

4 (a) This question was designed to elicit candidates understanding of building a working therapeutic relationship with a client who had multiple losses. There were some good answers that showed a sophisticated understanding of the risks of working with a client who could become suicidal. These answers explained the tensions between promoting the rights of a suicidal client to determine their own future and that of promoting beneficence. Poor answers classed this as a safeguarding issue without any recourse to considering Alex and his right to confidentiality. It is important that candidates do not vicariously introduce the word safeguarding and think about it in the context of safeguarding children and vulnerable adults; Alex is neither.

Some answers did not deal with the suicidal risk but focussed on establishing a solid working alliance and clarifying what it was that Alex wanted from counselling and how they could collaborate with him to meet his needs within the appropriate professional boundaries. These were equally creditworthy. Poor answers were characterised by rather general descriptions about how specific counselling skills would be applied; over long explanations of the contracting process and contract terms; and, extemporising beyond the scenario.

(4b) Many candidates showed a very good appreciation of the process of making a referral including supporting Alex whilst the referral came to fruition; taking account of his views and feelings; agreeing what information might be passed on. Poor answers tended to focus more on the where he might be referred and why, rather than the how; forgetting that Alex has the capacity to do his own research.

Recommendations

Encourage candidates to try and imagine themselves in the role of counsellor to the client in the scenario as if they were about to **embark on practice with this client** and respond from this vantage point.

When teaching theoretical models of supervision (particularly those centres that use Proctor's three stages) remind candidates it is not necessarily helpful to recount these stages unless the question specifically asks for a theoretical explanation.

When teaching person-centred theory, encourage students to gain an understanding of the necessary and sufficient conditions that goes beyond simply being able to list the 3 best known of them.

Remind candidates that whilst the format of the paper will be the same, client scenario followed questions, the questions can and will vary. Prepared answers to previous examinations are unlikely to be helpful (or successful). Close reference to the client and the presenting issues in the scenario is essential for success.

Encourage candidates to make every effort to write in a legible fashion, difficult though this can be under exam conditions.